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CONFIRMATION NO. 5627

<b>SERIAL NUMBER</b> 10/727,261	<b>FILING OR 371(c) DATE</b> 12/02/2003 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1634	<b>ATTORNEY DOCKET NO.</b> 22727/04148
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/513,246 10/22/2003 and claims benefit of 60/500,736 09/05/2003  
and claims benefit of 60/430,202 12/02/2002

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
\*\* 03/03/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OH	SHEETS DRAWING 81	TOTAL CLAIMS 30	INDEPENDENT CLAIMS 12
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS  
24024

## TITLE

Rapid detection of microorganisms

<b>FILING FEE RECEIVED</b> 927	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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